

SECOND REGULAR SESSION
SENATE COMMITTEE SUBSTITUTE FOR
SENATE BILL NO. 566
93RD GENERAL ASSEMBLY

Reported from the Committee on Aging, Families, Mental and Public Health, February 23, 2006, with recommendation that the Senate Committee Substitute do pass.

3362S.03C

TERRY L. SPIELER, Secretary.

AN ACT

To repeal sections 195.070, 195.100, and 334.104, RSMo, and to enact in lieu thereof three new sections relating to advanced practice registered nurses.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Sections 195.070, 195.100, and 334.104, RSMo, are repealed
2 and three new sections enacted in lieu thereof, to be known as sections 195.070,
3 195.100, and 334.104, to read as follows:

195.070. 1. A physician, podiatrist, dentist, or a registered optometrist
2 certified to administer pharmaceutical agents as provided in section 336.220,
3 RSMo, **or advanced practice registered nurse as defined in section**
4 **335.016, RSMo, delegated the authority to prescribe controlled**
5 **substances listed in Schedules II, III, IV, or V of section 195.017, under**
6 **a collaborative practice agreement, as defined in section 334.104, RSMo,**
7 in good faith and in the course of his or her professional practice only, may
8 prescribe, administer, and dispense controlled substances or he or she may cause
9 the same to be administered or copied by an individual as authorized by
10 statute.

11 2. A veterinarian, in good faith and in the course of his professional
12 practice only, and not for use by a human being, may prescribe, administer, and
13 dispense controlled substances and he may cause them to be administered by an
14 assistant or orderly under his direction and supervision.

15 3. A practitioner shall not accept any portion of a controlled substance
16 unused by a patient, for any reason, if such practitioner did not originally
17 dispense the drug.

EXPLANATION—Matter enclosed in bold-faced brackets [thus] in this bill is not enacted and is intended to be omitted in the law.

18 4. An individual practitioner may not prescribe or dispense a controlled
19 substance for such practitioner's personal use except in a medical emergency.

 195.100. 1. It shall be unlawful to distribute any controlled substance in
2 a commercial container unless such container bears a label containing an
3 identifying symbol for such substance in accordance with federal laws.

4 2. It shall be unlawful for any manufacturer of any controlled substance
5 to distribute such substance unless the labeling thereof conforms to the
6 requirements of federal law and contains the identifying symbol required in
7 subsection 1 of this section.

8 3. The label of a controlled substance in Schedule II, III or IV shall, when
9 dispensed to or for a patient, contain a clear, concise warning that it is a criminal
10 offense to transfer such narcotic or dangerous drug to any person other than the
11 patient.

12 4. Whenever a manufacturer sells or dispenses a controlled substance and
13 whenever a wholesaler sells or dispenses a controlled substance in a package
14 prepared by him, he shall securely affix to each package in which that drug is
15 contained, a label showing in legible English the name and address of the vendor
16 and the quantity, kind, and form of controlled substance contained therein. No
17 person except a pharmacist for the purpose of filling a prescription under sections
18 195.005 to 195.425, shall alter, deface, or remove any label so affixed.

19 5. Whenever a pharmacist or practitioner sells or dispenses any controlled
20 substance on a prescription issued by a physician, dentist, podiatrist [or],
21 veterinarian, **or advanced practice registered nurse**, he shall affix to the
22 container in which such drug is sold or dispensed, a label showing his own name
23 and address of the pharmacy or practitioner for whom he is lawfully acting; the
24 name of the patient or, if the patient is an animal, the name of the owner of the
25 animal and the species of the animal; the name of the physician, dentist,
26 podiatrist or veterinarian by whom the prescription was written; and such
27 directions as may be stated on the prescription. No person shall alter, deface, or
28 remove any label so affixed.

 334.104. 1. A physician may enter into collaborative practice
2 arrangements with registered professional nurses. Collaborative practice
3 arrangements shall be in the form of written agreements, jointly agreed-upon
4 protocols, or standing orders for the delivery of health care
5 services. Collaborative practice arrangements, which shall be in writing, may
6 delegate to a registered professional nurse the authority to administer or dispense
7 drugs and provide treatment as long as the delivery of such health care services

8 is within the scope of practice of the registered professional nurse and is
9 consistent with that nurse's skill, training and competence.

10 2. Collaborative practice arrangements, which shall be in writing, may
11 delegate to a registered professional nurse the authority to administer, dispense
12 or prescribe drugs and provide treatment if the registered professional nurse is
13 an advanced practice nurse as defined in subdivision (2) of section 335.016,
14 RSMo. Such collaborative practice arrangements shall be in the form of written
15 agreements, jointly agreed-upon protocols or standing orders for the delivery of
16 health care services.

17 3. The state board of registration for the healing arts pursuant to section
18 334.125 and the board of nursing pursuant to section 335.036, RSMo, may jointly
19 promulgate rules regulating the use of collaborative practice arrangements. Such
20 rules shall be limited to specifying geographic areas to be covered, the methods
21 of treatment that may be covered by collaborative practice arrangements and the
22 requirements for review of services provided pursuant to collaborative practice
23 arrangements. Any rules relating to dispensing or distribution of medications or
24 devices by prescription or prescription drug orders under this section shall be
25 subject to the approval of the state board of pharmacy. In order to take effect,
26 such rules shall be approved by a majority vote of a quorum of each
27 board. Neither the state board of registration for the healing arts nor the board
28 of nursing may separately promulgate rules relating to collaborative practice
29 arrangements. Such jointly promulgated rules shall be consistent with guidelines
30 for federally funded clinics. The rulemaking authority granted in this subsection
31 shall not extend to collaborative practice arrangements of hospital employees
32 providing inpatient care within hospitals as defined pursuant to chapter 197,
33 RSMo.

34 4. The state board of registration for the healing arts shall not deny,
35 revoke, suspend or otherwise take disciplinary action against a physician for
36 health care services delegated to a registered professional nurse provided the
37 provisions of this section and the rules promulgated thereunder are
38 satisfied. Upon the written request of a physician subject to a disciplinary action
39 imposed as a result of an agreement between a physician and a registered
40 professional nurse or registered physician assistant, whether written or not, prior
41 to August 28, 1993, all records of such disciplinary licensure action and all
42 records pertaining to the filing, investigation or review of an alleged violation of
43 this chapter incurred as a result of such an agreement shall be removed from the
44 records of the state board of registration for the healing arts and the division of

45 professional registration and shall not be disclosed to any public or private entity
46 seeking such information from the board or the division. The state board of
47 registration for the healing arts shall take action to correct reports of alleged
48 violations and disciplinary actions as described in this section which have been
49 submitted to the National Practitioner Data Bank. In subsequent applications or
50 representations relating to his medical practice, a physician completing forms or
51 documents shall not be required to report any actions of the state board of
52 registration for the healing arts for which the records are subject to removal
53 under this section.

54 **5. Within thirty days of any change and on each renewal, the state**
55 **board of registration for the healing arts shall require all physicians to**
56 **identify whether a physician is engaged in any collaborative practice**
57 **agreement or physician assistant agreement and also report to the board**
58 **the name of each licensed professional with whom the physician has**
59 **entered into such agreement. The board may make this information**
60 **available to the public. The physician shall also provide the board with**
61 **a copy of each such agreement entered into by the physician and the**
62 **board shall review such agreements for compliance under this chapter.**

63 **6. Notwithstanding anything to the contrary in this section, a registered**
64 **nurse who has graduated from a school of nurse anesthesia accredited by the**
65 **Council on Accreditation of Educational Programs of Nurse Anesthesia or its**
66 **predecessor and has been certified or is eligible for certification as a nurse**
67 **anesthetist by the Council on Certification of Nurse Anesthetists shall be**
68 **permitted to provide anesthesia services without a collaborative practice**
69 **arrangement provided that he or she is under the supervision of an**
70 **anesthesiologist or other physician, dentist, or podiatrist who is immediately**
71 **available if needed.**

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